RESPONSE TO INTERVENTION: HOW IS IT PRACTICED AND PERCEIVED?

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This study is a descriptive study designed to examine how school personnel are implementing the Response to Intervention (RTI) process and how they perceive the process. Using an online survey, school personnel in rural and urban schools in South Eastern Texas were asked about the RTI process on their campus and their opinions of the process. Participants were general and special educators, school administrators and related personnel. The sample consisted of 99 people who completed the entire survey. The authors found strengths in the RTI process in terms of early identification of students for RTI and collaboration among school personnel. Areas that needed improvement included writing measurable goals and having a system of consistent progress monitoring and data collection.

The act of teaching, re-teaching and working with struggling students is not a new concept for classroom teachers. Even in the 1900's students who attended school did not always work on the same assignments or subjects at the same time. Teachers would alter assignments or order of instruction to help individual students (Ellis, 2005; Gwaltney, 2001). Interventions, formal and informal, have been common in schools for many years. More recently Response to Intervention (RTI) has been implemented to ensure that all students receive any needed instruction and interventions to achieve academic success. RTI is a formal process implemented by schools to provide direct instruction/intervention for all students experiencing academic and/or behavioral difficulties (Gerzel-Short & Wilkins, 2009). The primary goal of RTI is to provide the interventions a struggling student would need to become successful in the general education curriculum. If the interventions are not successful, that student would continue in the general education setting. If interventions are not successful, the school district may decide to implement different interventions or may initiate a referral for special education eligibility testing.

Currently, RTI is implemented in different degrees across this country. As of 2007, 15 states had adopted an RTI model. Twenty-two states were in the development stage, 10 states were providing guidance to schools and three states were not in the process of developing a model or the information was unclear (Berkeley, Bender, Peaster, & Saunders, 2009). It has been noted that most schools that use the RTI process are primarily using a *largely grass roots effort in behavior analysis* to plan and implement interventions (VanDerHeyden, Witt, & Gilbertson, 2007).

RTI and Current Literature

Many approaches to RTI are addressed in the current literature (Berkeley et al., 2009). Inherent to all approaches is a process to: (1) define a student's problem; (2) plan an intervention for the student; (3) implement the intervention, and (4) evaluate the student's progress (Bender & Shores, 2007; Fuchs, Mock, Morgan, & Young, 2003). Identifying problems, planning interventions, and evaluating a student can be difficult. It is imperative that interventions are reliable, accurate, and easy to implement. Furthermore, the RTI process is more likely to fail if the campus is weak at selecting, organizing, or delivering interventions (Daly, Martens, Barnett, Witt, & Olson, 2007).

Campuses that have successful RTI procedures implement research-based interventions using multiple tiers of instruction. Teachers provide high quality instruction starting in the general curriculum (Tier I) and continue with more intensive interventions (Tier II and Tier III). Tier II and Tier III often differ based on the time spent on the intervention (Reutebuch, 2008). Minutes and days spent in interventions may differ depending on the tier. For example, intervention time might start at 30 minutes twice a week

at Tier II, but later increase to 45 minutes daily (Tier III) if the student needs more intervention time to be successful. Tier III may also be the time in the process where a referral for special education testing is initiated (Murawski & Hughes, 2009).

Other successful RTI procedures, as noted by Reutebuch (2008), include having a system in place to identify students with behavioral or academic struggles early and checking a student's progress frequently to measure the effectiveness of interventions. Collaborating with a variety of personnel, parents and families during the process is also important for successful RTI. Interventions that incorporate the family are more effective in building skills as it is not uncommon for students who are struggling to need interventions that can continue when they are at home (O'Shaughnessy, Lane, Gresham, & Beebe-Frankenberger, 2003). Finally, schools with successful RTI procedures monitor the process by using fidelity checks to insure that interventions are implemented with consistency and as the team intended (Reutebuch, 2008; Telzrow, McNamara, & Hollinger, 2000).

RTI and Special Education Eligibility

The possible use of RTI as a means of ruling out or identifying students who may or may not have Learning Disabilities (LD) began in 1982 as part of a National Research Council (NRC) study (Heller, Holtzman, & Messick, 1982). The NRC study proposed that special education classification should be based on three basic inquiries: (1) Is the quality of the general education adequate to address learning? (2) Is the special education program able to improve student learning? and, (3) Is the assessment process used for identification meaningful? Since 1982, others have proposed various models for the use of RTI to determine eligibility under the definition of a specific learning disability (SLD) (Fuchs, 1995; Fuchs & Fuchs, 1998; Bullis & Walker, 1994). In 2004 Congress amended the Individual with Disabilities Education Act (IDEA) in part, to address problems attributed to poor interpretation and misuse of the discrepancy model for identifying students with specific learning disabilities (Mather & Kaufman, 2006; Mesmer & Mesmer, 2008; Hale, Kaufman, Naglieri, & Kavale, 2006). With its 2004 amendments to the IDEA, Congress essentially incorporated and codified the use of RTI to determine a specific learning disability twenty two years after the inception of the SLD category.

Some changes made to the IDEA are aimed at reforming how students with learning disabilities are identified for special education services. Specifically, public schools that use RTI should provide direct instruction/intervention when students demonstrate academic or behavioral difficulties prior to making a special education referral. It is quite possible for a student to make adequate progress with the intervention in place and therefore, never require a referral for special education testing. Common to the RTI process implemented by schools, instruction must be research-based and conducted for a reasonable amount of time before pursuing a possible diagnosis of a disability. While some school districts use RTI only to determine eligibility, other districts require cognitive and academic assessments, and others still use a hybrid of RTI and psychological assessment to determine eligibility (Hale, et al., 2006). Since RTI is not mandated as the sole way to determine a specific learning disability, public schools now have to determine how they will use the RTI process to determine special education eligibility for a learning disability.

Berkeley, Bender, Peaster and Saunders (2009) found that 37states were using formal psychological testing and/or RTI. Ten states were using psychological testing and only two states used RTI exclusively to identify students with a learning disability. Focusing on RTI, Fuchs (2003) observed that different methods of intervention will impact the rate of students labeled as learning disabled. Fuchs notes that we can expect tremendous variation across locales in terms of who is indentified and what the concept of learning disability means (2003, p.184). This statement appears to be equally true when comparing states and how they determine which procedures they will use to evaluate students for specific learning disabilities.

Perceptions of RTI

There is limited research regarding how stakeholders on campus teams perceive the RTI process and its impact on students. Researchers (Dunn, Cole, C.M., & Estrada, 2009) have noted that future research should incorporate the perspective of all stakeholders involved in the referral process. Teachers' perspectives play a key role in the delivery of instruction in the classroom and on referral for interventions and/or special education testing (Dunn, et. al, 2009).

Present Study

Within the present study we were interested in examining how school personnel implement RTI and

what their perceptions are of the RTI process. Previous researchers focused on how schools implement RTI through a case study method by examining procedures at specific schools (Dexter, Hughes, Farmer, 2008; Daly et al., 2007; Mesmer & Mesmer, 2008). Other researchers have been interested in reviewing what stages states are at in incorporating RTI into their schools (Berkley et al., 2009). As illustrated by the literature review there is limited information about the processes various schools use to implement RTI as well as the overall perceptions of RTI. Consequently, we were interested in contributing to the knowledge base about how RTI is initiated; how interventions are developed; who participates in the process; what the follow- up process consists of; and, how the eligibility process for special education services is handled. Finally, given that RTI is in its infancy in many schools we were interested in discovering how school personnel perceive the process.

Method

Participants

In the spring of 2009, general and special educators as well as administrators and related personnel in rural and urban schools in South Eastern Texas were invited to take part in an online survey querying them about the RTI process and their opinions of the process. The survey was sent out to administrators within the service area of a regional Educational Service Center. The administrators were asked to forward the survey to their faculty and staff who were involved in RTI. A total of 158 educators began the survey. Ninety nine completed the majority of the survey and thus were included in the data analysis. The other 59 completed only the first few questions and were excluded from the analysis. Sixty seven percent of the respondents were female elementary school general education teachers. The remainder of the respondents included administrators, diagnosticians, counselors and special education teachers. See Table 1 for demographic characteristics.

Table 1.
Demographic Characteristics (in Percentages)

Gender Position Held		Years in Type of School		Size of School District	Level of	
		Position			Educ.	
Male	Diagnostician	0-3years	Elem. School	Less than 199	Bachelors'	
				students	Degree	
9.8	5.2	36.5	84.8	12.5	62.8	
Female	Administrator	4-8 years	Middle School	200-429 students	Master's	
					Degree	
			10.8			
90.2	19.8	28.1		24	37.2	
	Counselor	9-13 years	High School	430-979 students		
	5.8	13.5	4.3	20.8		
	Gen. Ed. Teacher	14 years and		980 – 2084 Students		
	67.4	above		33.3		
		21.9				
	Special Ed.			More than 2084		
	Teacher					
1	4.7			9.4		

Survey

The survey was developed using Survey Monkey (http://www.SurveyMonkey.com), an online survey tool. Educators were asked questions about their experience with the RTI process in their schools related to the RTI initiation process; documentation of goals and data collection; intervention procedures; and, the follow up decision making process. Additionally, educators were queried regarding their opinion of the RTI process. Questions regarding the RTI process were based on a five-point likert scale with response options ranging from never to always and including a response of I don't know. Questions regarding educators' opinions were also based on a five-point likert scale but response options ranged from strongly agree to strongly disagree and respondents could indicate that they did not have an opinion. Space was provided for the respondents to make comments after each question. Demographic information regarding characteristics of the respondents was also obtained.

Questions were developed within the survey based on the first author's experience as a Diagnostician in the schools facilitating the RTI process. The initial survey was piloted on educators in the field of

education to determine readability, comprehensibility as well as relevance to the subject. Information from the pilot study resulted in several changes in question wording as well as question deletions.

Procedure

The names of administrators in the 41 school districts served by the Educational Service Center were obtained and an email was sent in March of 2009 with a link to the survey. The administrators were asked to complete the survey as well as disseminate the survey to their faculty and related staff. The email contained an explanation of the purpose of the survey as well as assurances that anonymity was guaranteed to participants. No identifying information was obtained on the survey. The administrators were contacted a second time in May of 2009 again asking for their participation and for their help in passing the survey onto their faculty.

Data analysis

This is a descriptive study. The researchers were interested in finding out how educators at various schools were initiating, planning, implementing and following up on the RTI process as well as how they perceived the process. Thus frequencies and descriptions of responses to questions on the survey are presented. Additionally, participant comments were included to further illustrate their activities and perceptions of the RTI process. Comments were summarized according to themes and direct comments were included when they represented themes.

Results and Discussion

Initiation of RTI

The authors were interested in determining who on campus initiates the RTI process and, who part of the RTI decision team is. Eighty seven percent of the respondents indicated that the general education teacher initiates the RTI process. Seventy seven percent of the respondents indicated that this process is often initiated when a student has a low score on a campus wide screening test. See Table 2. Respondents indicated that once a student is identified as a candidate for RTI the primary members of the RTI team include the general education teacher, special education teacher, administrator and reading specialist. Thirty four percent of the respondents indicated the parent was a part of the team. Comments indicate that parent input is often sought by individual teachers before RTI meetings so many parents do not attend the actual meeting.

Table 2.

Participants Responses (in Percentages) to How the RTI Process is Initiated in the Schools

Item	Never	Rarely	Mostly	Always	Don't Know
Teacher Identifies students	3	6	38	49	4
Low score on Campus Screening	5	8	54	23	10.3
Parents attend RTI meetings	39	17	31	3	10.2

Initial RTI Meeting: Development of goals, intervention and documentation

This section of the survey was meant to determine how personnel on various campuses make decisions and write goals about academic areas targeted for intervention. See Table 3. The majority of the respondents indicated that team members collaborate to identify at least two areas of weakness to target. Comments from respondents indicate that if there are several areas to address, all are addressed however these are focused on one or two at a time. Seventy seven percent of the respondents indicated that once these areas of weakness are identified they are operationally defined so they can be consistently observed and monitored. The majority of the respondents agreed that goals were written to include information about how the student is currently functioning and that teachers incorporated student strengths into goals. Sixty one percent revealed that objective criteria to measure progress after the intervention is also included in the goals. However 25% responded that measurable objective criteria were never or rarely written into the RTI goals. Upon review of the comments made by respondents it appears that developing and writing measureable goals may be an area in need of improvement. In some cases comments indicate that goals state that students will make improvement without indicating what improvement looks like. Fifty six percent of the respondents indicated that the intervention plan included a schedule for the student to be tested for progress on goals at least one to two times a week. However 27% indicated that a schedule for periodic assessment is never or rarely included in the intervention plan. Comments indicate that periodic assessment to measure progress varies. Most reported assessment occurred once or twice a week. However, several others reported assessment activities once a month to every six weeks. Finally, the majority indicated that a follow up meeting is scheduled to determine progress.

Table 3.

Participants Responses (in Percentages) to Questions About Activities in Initial RTI Meeting

Item	Never	Rarely	Mostly	Always	Don't Know
Team identifies two areas of	2	10	46	32	10
weakness					
Areas of weaknesses are	2	12	33	44	8
operationally defined					
Goals include current level of	3	6	36	46	8
functioning					
Goals include objective criteria for	7	18	29	32	14
measuring progress					
Entire team participates in	2	16	44	31	7
intervention development					
Schedule for testing progress	7	20	32	24	17
included in intervention plan					

Respondents were also queried about who participates in the development of the interventions to go along with the academic goals. Seventy five percent indicated that all team members participate in developing interventions.

Intervention Process

The authors were interested in who was providing intervention during the RTI process and whether they were qualified to provide intervention. See Table 4. Consequently, educators were asked whether a reading specialist, math specialist or other personnel specifically trained in the subject area worked with students during intervention. Sixty percent indicated that specially trained personnel worked with students. Thirty two percent of the respondents indicated that this was never or rarely the case. Those who indicated specialized personnel did not work with students commented that instructional aides, the teacher, high school mentors and peers worked with students on their intervention. When asked whether specific tiers for intervention in reading and math were implemented on their campus, 80% of the respondents indicated they were for reading with 11% indicating never or rarely and 61% indicated they were for math with 25% indicating never or rarely.

Table 4.
Participants Responses (in Percentages) to Questions About the Intervention Process

Item	Never	Rarely	Mostly	Always	Don't Know
Specialists in subject area work	13	19	39	21	8
with students					
Specific tiers for interventions in		9	30	50	9
Reading are implemented					
Specific tiers for interventions in	7	18	35	26	14
Math are implemented					
Students are given extra time to	2	5	42	41	9
work on intervention activities					
Students are reinforced for	8	38	30	5	19
participation in the process					
Students are reinforced for	7	27	37	10	19
progress					

The authors were also interested in how students are encouraged as they go through the RTI process. See Table 4. Respondents were asked if students were given extra time, outside of regular instruction, to work on interventions. Additionally they were asked if students were reinforced for participating and for their progress toward RTI goals. Eighty three percent indicated that students were given extra time. As far as reinforcement for participating and making progress toward goals 46% of the respondents indicated that students were never or rarely reinforced for participation and 34% indicated students were never or rarely reinforced for progress. For this area almost 20% of the respondents indicated they did not know if students were reinforced or not.

Follow-up Process

Within this section authors queried educators about whether a follow up meeting was scheduled, who attended, what if any data was examined and what the outcomes were. See Table 5. The majority of the respondents indicated that a follow up meeting was held to monitor student's progress and that the

team consisted of the same members who participated in the initial RTI meeting. The authors were interested in whether parents were invited to and participated in this follow up meeting. Forty eight percent indicated that parents were rarely or never invited and not surprisingly then 56% indicated parents never or rarely participated in follow up RTI meetings. This is consistent with the findings for the initiation process. Parents are not typically part of the RTI team; however their input is sought by classroom teachers prior to RTI meetings. The majority of the respondents indicated that teachers brought data in the form of charts and graphs so student performance could be compared to the prior agreed upon goals. Comments indicate that data is brought but at some schools the process is still being worked out as the data may not be objective measurable data that would support decision making.

Table 5.
Participants Responses (in Percentages) to Questions to Follow-up Activities

Item	Never	Rarely	Mostly	Always	Don't Know
Follow-up meeting is held	2	6	28	57	6
Same members of initial RTI meeting attend follow-up	1	2	40	50	7
Parents invited to follow-up	30	18	10	33	11
Parents attend follow-up	28	28	26	4	14
Teachers bring objective data to follow-up meeting	5	10	18	56	12
Based on data current level of performance is determined	2	2	30	60	5
At least fifty percent make progress	1	2	51	25	21
At least fifty percent meet goals	1	6	60	11	21
Those who did not progress get a new round of interventions	2	3	36	45	14
Those who did not progress are referred to special education	2	28	43	14	14
Those referred to special ed. Qualify as a person with a learning disability (LD)	1	7	55	8	29
Eligibility determination for LD is based solely on RTI	29	25	17	3	25
Eligibility determination for LD is based on RTI as well as IQ and achievement testing	1	2	33	41	23

The authors were also interested in the level of progress made as it related to RTI in the schools. Seventy six percent of the respondents indicated that at least half of the time students make some progress and 71% of the respondents indicated that at least half of the time students meet their goals. For those who did not progress toward their goals a majority indicated that a new round of interventions is started. Additionally, for those who have not progressed a large number indicated that a special education referral is made. Furthermore the majority concur that those who were referred and did not respond to interventions tended to qualify for special education services as a student with a learning disability.

Finally, the authors were interested in how eligibility determinations for special education are made in relation to the RTI data collected. Approximately 20% of the respondents indicated that eligibility is determined for learning disabilities based solely on the RTI data. Seventy four percent responded that eligibility is actually determined using a combination of RTI data and standardized testing such as IQ and achievement tests. Overwhelmingly, comments indicate that RTI and standardized assessments inform the eligibility decision more so than one or the other processes alone.

Participants' Opinions of RTI process

As part of the survey educators were asked to give their opinions about the RTI process. See Table 6. Overall the majority of the respondents indicated they felt that RTI benefits students. However in examining their comments a theme emerged. The respondents indicated that they were already helping their students before RTI. One respondent wrote: *The students included in the RTI process are the same students who were being serviced before RTI was part of the process.* Another wrote, *There are some*

benefits, yes. But if you are a good teacher you are NOT going to let a student having problems fall by the wayside. We are here for the children. It just takes so much extra time to document every little thing that you do to prove that you ARE helping the child. Finally, along this same theme a respondent wrote, We do interventions all the time for all the students as needed. RTI helps put a process/structure in place but the time and documentation is sometimes prohibitive.

Table 6.
Participants Responses (in Percentages) to Questions About Their Opinion of RTI

Item	Strongly	Agree	Disagree	Strongly	No Opinion
	Agree			Disagree	
RTI benefits students	26	49	6	2	17
RTI takes up too much time	9	28	32	14	17
Collecting data required to monitor progress is difficult	13	40	28	5	15
Educators learn a lot about their students through RTI	14	53	13	5	14
RTI process improves parental involvement	6	31	26	8	29
Parent involvement enhances the RTI process	13	42	13	2	31
Students were better served prior to the implementation of the RTI model	5	8	44	13	30

Educators were asked if they thought the RTI process took up too much of their time. Thirty seven percent agreed that the RTI process takes up too much time while 46% disagreed that the RTI process takes up too much time. In examining the respondents' comments a main theme seemed to center around the paperwork requirements. One respondent wrote *The documentation and preparation for materials is the time consuming aspect of RTI*. Another wrote, *Lots of paper work!!!!!! So much follow up and paper work!!!!!*

Educators were asked if collecting data that is required for objective monitoring of progress during intervention is difficult. Fifty three percent agreed that collecting data is difficult, and 33% disagreed. The written responses by the respondents indicated that the data collection process itself was not so difficult but time consuming. For example one respondent wrote, *It* (data collection) *is just time consuming, data is important.*

The majority agreed that educators learn a lot about their students through the RTI process. One respondent wrote about how the process helps others know the students, *The classroom teachers typically know the most, but it is good that so many team members are able to learn about and identify with and help support the students*. Other comments made to this question seemed to come from those who may not be satisfied with the RTI process. One wrote, *True educators know their students without this process*. Similarly another respondent wrote, *RTI and computer generated graphs cannot tell more about a student than a teacher who works daily with a student*.

Thirty seven percent agreed that the RTI process improves parental involvement in students' education and thirty four percent disagreed. One respondent wrote, *Input from parents is important to understanding the whole student*. However comments to this question indicate that although educators believe parental involvement enhances the RTI process, there is very little parental involvement in the process. A respondent wrote, *They become aware of what we can offer their child*. One respondent indicated that parents are typically not invited. Another respondent wrote, *If parents are involved, they already are.* An RTI does not make them more involved. Fifty five percent of the respondents agreed that when parents are involved it enhances the RTI process.

In response to whether they thought students were better served prior to the RTI model the majority indicated they disagreed that students were better served prior to the RTI model. Interestingly 30% indicated no opinion. Comments include, We have always done business this way, now it has a name and Perhaps for some teachers, the RTI process is a help, but after many years of teaching I feel that I have always done above and beyond the call of duty to help my students achieve success and do the best they can do.

Conclusion

According to Reutebuch (2008) a successful RTI process depends on whether schools have in place a method to identify students early; to intervene using various tiers of research based instruction; to collaborate among school personnel and parents; and, a system to monitor the RTI process and student progress. The results of this study indicate school personnel are addressing many of the necessary components of RTI proposed by Reutebuch. Within this sample the majority of the school personnel are practicing early identification by having a system where teachers initiate the process based on campus wide assessments. In most cases specialists in reading and math are implementing the interventions using a system of tiers. However it was reported that instructional aides and peers were also providing intervention. Collaboration among school personnel also appears to be the norm in developing and monitoring RTI. However, it does not appear that parents are typically part of this process. The responses also indicate that progress monitoring may be an issue that needs attention in RTI processes adopted by schools. Results show objective measures were not necessarily always a part of data collection and student progress was not always monitored on a regular and consistent basis.

Overall results indicate the RTI process is perceived positively by educators within the schools participating in the survey. However, many reported that good teachers were already engaging in intervention activities prior to the RTI mandates in their school. The participants comments seemed to indicate a level of frustration with the RTI process because it is something the teachers were already doing on their own.

Finally, school personnel participating in this study indicated that RTI data in conjunction with standardized assessments plays an important role in determining eligibility for special education services under the category of specific learning disability. This finding is positive in that RTI is not a requirement in IDEA. Rather it is another method that can be used alone or in conjunction with other methods. School personnel who are using RTI data as well as data from standardized assessments are able to get a clearer picture of students' needs than if they were just using one or the other method by itself.

Recommendations

Given the limited scope of this study further research must be done to include a larger population of educators engaging in the RTI process in rural and urban schools in order to determine with more confidence the strengths and weaknesses of RTI implementation in the schools. That being said, the results of this study demonstrate that specific aspects of the RTI process may need additional attention. As noted above, the data collection and progress monitoring aspects of the RTI process in this sample may need some attention. The RTI team must develop measurable objectives and a means to collect the data before interventions are begun. Single subject research designs provide an excellent framework by which to collect data and monitor progress (Alberto and Troutman, 2009) and can be used for this purpose. Single subject research design structures can provide educators with options for collecting data; creating structured interventions; organizing it; and determining effectiveness of intervention through graphic representations.

Educators and administrators implementing RTI in their schools would also do well to involve parents in the planning, intervention and follow up processes. Research surrounding family involvement in education indicates that students benefit educationally and in post secondary endeavors from family involvement (Fan & Chen, 2001). Parents are uniquely situated to support student learning beyond the hours students are in the classroom. Consequently, providing parents a voice in the RTI process as well as information on how to help their sons or daughters gain specific academic skills will only make the work of the public school educator less difficult.

School administrators must also be mindful of who is providing the interventions and support to the students receiving RTI. Our results indicated that in most cases teachers, and reading and math specialist provided intervention but it was also reported that peers and instructional aides were providing intervention. When lack of adequate instruction may be a reason for students' skill deficits it is only appropriate for those who are experienced with teaching and teaching techniques; and well versed in research based interventions to be responsible for intervention. Peers and instructional aides can provide a support role when students obtain the needed skills and require practice and assistance to obtain skills to automaticity.

Finally, school administrators may offer more support and acknowledgement of efforts to classroom

teachers as they participate in the formal RTI process. The comments by teachers regarding perceptions of RTI seemed to indicate that teachers were frustrated with the cumbersome process of meetings, data collection and assessment of effectiveness. They commented that good teachers were already doing RTI activities before RTI was ever a mandate in their school. Consequently, teachers' efforts before and during the RTI process should be acknowledged and supported.

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